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CONFIRMATION NO. 7268

SERIAL NUMBER	FILING or 371(c) DATE RULE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/997,543		705	3691	DE920000042US1 (20791)

APPLICANTS

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** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

EUROPEAN PATENT OFFICE (EPO) 00127046.1 09/12/2000

** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **

12/19/2001

Foreign Priority claimed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119(a-d) conditions met	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
Verified and	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWINGS	TOTAL CLAIMS	INDEPENDENT CLAIMS
Acknowledged	/BIJENDRA K SHRESTHA/ Examiner's Signature	GERMANY	4	15	5

ADDRESS

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TITLE

Aging of electronic payment units

FILING FEE RECEIVED 908	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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